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76312 7590 12/15/2009

ROBERT A. GONSALVES
12 LEXINGTON STREET
WOBURN, MA 01801

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_____ (Deposited name)
_____ (Signature)
_____ (Date)

APPLICATION NO.	FILED DATE	PRINT NAME OF INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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10/798,004 03/12/2004 **ROBERT A. GONSALVES** **RG-3** **5175**

Title of Invention: VIDEO CAMERA UTILIZING SEQUENTIAL DIVERSITY IMAGING FOR IMAGE CLARIFICATION

APPL. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE DUE	PREN. PAID ISSUE FEE	TOTAL FEES DUE	DATE DUE
nonprovisional	YES	\$755	\$0	\$0	\$755	03/15/2010

EXAMINER	ART UNIT	CLASS/SUBCLASS
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NGUYEN, LUONG TRUNG 2622 348-335000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.163).

☐ Change of correspondence address for Change of Correspondence Address form PTO/SF 1221 attached.

☐ "Fee Address" indication on "Fee Address" Indication form PTO/SF 427, Rev. 03-02 (or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

3. ASSIGNMENT NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE (CITY AND STATE OR COUNTRY)

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☐ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

- ☒ Issue Fee
☐ Publication Fee (No small entity discount permitted)
☐ Advance Order - # of Copies

4b. Payment of Fee(s): (Please first supply any previously paid issue fee shown above)

- ☐ A check is enclosed. ☒ **ELECTRONIC FILING**
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☐ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number _____ (enclose an extra copy of this form)

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

Date **DECEMBER 18, 2009**

Typed or printed name

ROBERT A. GONSALVES

Registration No.

CUSTOMER NO. 76312

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Collection is governed by 25 U.S.C. 122 and 37 CFR 1.14. This collection is limited to no more than 12 minutes to complete, including gathering, preparing, and updating the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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